

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055127

Entity Name: RIVALRY, LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

4765 RIVERGLEN BLVD
PONCE INLET, FL 32127

New Principal Place of Business:

Current Mailing Address:

4765 RIVERGLEN BLVD
PONCE INLET, FL 32127

New Mailing Address:

FEI Number: 26-2736777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTEGA BUSINESS SERVICES, LLC
554 LOMAX STREET
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

ROLLINS III, JACK B
4765 RIVERGLEN BLVD
PONCE INLET, FL 32127 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JACK B ROLLINS III

04/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: ROLLINS III, JACK B MGR
Address: 4765 RIVERGLEN BLVD
City-St-Zip: PONCE INLET, FL 32127 US

Title: MGR () Change (X) Addition
Name: ROLLINS II, JACK B MGR
Address: 2804 WHITEHURST ROAD
City-St-Zip: DELAND, FL 32720 US

Title: MGR () Change (X) Addition
Name: DRIVER, GARY R MGR
Address: 554 LOMAX STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACK B ROLLINS III

MGR

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date